MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE			
APPLICANT(S)				

CLAIMS

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TOTAL CLAIMS	92	* 0.0		- 3-7		
CLAIMS	45	·····································		Comment of the Comment		eroreaction.

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM **PTO-1360** (REV. 3-78)

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